ESTIMATED FIDUCIARY BUSINESS TAX QUARTERLY PAYMENT FORMS

2001

1 Who Must Pay Estimated Tax

Every fiduciary required to file a Business Profits and/or Business Enterprise Tax return must also make estimated tax payments, for each individual tax, for its subsequent taxable period; unless the annual estimated tax for the subsequent taxable period, for each individual tax, is less than \$200. However, quarterly payments are required to be made whenever your **annual** estimated tax for the subsequent taxable period exceeds \$200 for either tax. (See Paragraph 6 for exceptions)

2 Where to Mail Payments

Mail estimated tax payments to:

NH Dept of Revenue Administration Document Processing Division PO Box 637 Concord NH 03302-0637

3 When to Make

CALENDAR YEAR FILERS:

1st quarterly payment due April 17, 2001 2nd quarterly payment due June 15, 2001 3rd quarterly payment due September 17, 2001 4th quarterly payment due December 17, 2001

FISCAL YEAR FILERS:

A quarterly payment is due on the 15th day of the 4th, 6th, 9th and 12th month following the close of your fiscal year.

FISCAL YEAR FILERS MUST ENTER THE TAX YEAR ON EACH ESTIMATE FORM.

4 Payment of Estimated Tax

Estimated tax may be paid in full with the initial declaration or in equal installments on the due dates.

CHECKS ARE TO BE MADE PAYABLE TO: **STATE OF NEW HAMPSHIRE**

5 Underpayment Penalty

A penalty may be imposed by law (RSA 21-J:32) for an underpayment of estimated taxes if the payments are less than 90% of that period's tax liability. If estimate payments are not made on time, even if 90% of the tax is eventually paid, an underpayment penalty may be applied. If an estimated payment is missed, send the payment as soon as possible to reduce any penalty.

This penalty will not be imposed if any of the statutory exceptions apply.

6 Exceptions to the Underpayment Penalty

The penalty shall not apply if you meet one of the exceptions provided in the law (RSA 21-J:32). Please use form DP 2210/2220 to see if you meet one of the exceptions or to compute the amount of the penalty. To obtain this form, please call the forms line at (603) 271-2192.

7 Specific Questions

SPECIFIC QUESTIONS not covered herein should be referred to the Taxpayer Assistance Office, PO Box 637, Concord, NH 03302-0637. Telephone (603) 271-2186. Hearing or speech impaired individuals may call TDD Access: Relay NH 1-800-735-2964.

FORM NH-1041-ES

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION ESTIMATED FIDUCIARY BUSINESS TAX QUARTERLY PAYMENT FORMS

1			mated Tax Worksheet (Keep for	your records – Do not file) BET(a)				
	ESTIMATED TAX BAS	STIMATED TAX BASE AND/OR GROSS BUSINESS PROFITS				///	BPT(b)	/////
	a BET Taxable Ba	ase after Apportionm	ent		////			
	b NH Taxable Bus	iness Profits after A	pportionment					
2	TAX					V///		77777
	a Line 1(a) x .005	i						
	b Line 1(b) x .08							
3	CREDITS							
	a RSA 162-L, CDI	FA Credit						
			de the BET Credit)	\/////////////////////////////////////				
4			ine 3(a) and/or 3(b)]					
6			s line 5)					
J	Data loc of Dubilless I	ands Due (iiile 4 les	COMPUTATION and REC	•				
			Total Due CALENDAR YEA					
	Date Paid	BET	Amount of each Installment (1/4 of line 6 of worksheet)			PT)	DUE DATI	
	1	\$	\$	\$			April 17, 2	001
	2	\$	\$	\$			June 15, 2	001
	3	\$	\$	\$			Sept. 17, 2	2001
	4	\$	\$	\$			Dec. 17, 20	001
	Lir	ne 3 Enter the TO	e Business Profits Tax Calculated TAL payment sum of lines 1 and 2 IMPORTANT	:			v= waz p==w	
1E	PENALTY PROVIS	IONS OF RSA 2	1-J:32 WILL APPLY IF THE (Cut along this line)	ESTIMATE REQUIREMEN	NIS	HAV	E NOT BEEN	1 ME
	5004	NEWHANDO		UE ADMINISTRATION				
	FORM -1041-ES	_	HIRE DEPARTMENT OF REVENU A TED FIDUCIARY BUSINES					
	722							
F	For the CALENDAR yea	r 2001 or other tax	k year beginning	and ending		FOR	DRA USE ONLY	
	•		Mo Day Year	Mo Day Year				
FOI	R DRA USE ONLY PLEAS	SE PRINT OR TYPE						
101	NAME	OF ESTATE OR TRUST		FEDERAL EMPLOYER IDENTIFICA	TION	NUMBE	R	
	NUMB	ER AND STREET ADDRES	S	1/4 Business Enterprise Tax	: 1	\$		
	ADDR	ESS (continued)		1/4 Business Enterprise Tax	2	\$		
	CITY/	TOWN, STATE & ZIP CODE		,,,,	_			<u> </u>
			1	Amount of This Payment		\$		
			ı				NEW HAMPSHIR	

FORM NH-1041-ES 722

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION **ESTIMATED FIDUCIARY BUSINESS TAX - 2001**

		FOR DRA USE ONLY
For the CALEND	AR year 2001 or other tax year beginning	and ending r
	54, 166	
	T DI FACE DRINT OR TYPE	
FOR DRA USE ONLY	PLEASE PRINT OR TYPE NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER
	AUMPED AND OTDEET ADDRESS	
	NUMBER AND STREET ADDRESS	1/4 Business Enterprise Tax 1 \$
	ADDRESS (continued)	' '
	CITY/TOWN, STATE & ZIP CODE	1/4 Business Profits Tax 2 \$
		Amount of This Payment 3
	NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION	Make checks payable to: STATE OF NEW HAMPSHIRE Enclose, but do not staple or tape, your payment with
	TO: PO BOX 637	this estimate. Do not file a \$0 estimate.
	CONCORD NH 03302-0637	NH-104 Rev. 1
	(Cut along this line)	
FORM	NEW HAMPSHIRE DEPARTMENT OF REVENI	IF ADMINISTRATION
NH-1041-ES	ESTIMATED FIDUCIARY BUSINES	
722		
122		FOR DRA USE ONLY
For the CALEND	AR year 2001 or other tax year beginning	and ending
	Mo Day Yea	r Mo Day Year
FOR DRA USE ONLY	PLEASE PRINT OR TYPE	FEDERAL FURI OVER IDENTIFICATION NUMBER
	NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER
	NUMBER AND STREET ADDRESS	
	ADDRESS (continued)	1/4 Business Enterprise Tax 1 \$
		1/4 Business Profits Tax 2 \$
	CITY/TOWN, STATE & ZIP CODE	
		Amount of This Payment 3 \$
	NH DEPT OF REVENUE ADMINISTRATION	Make checks payable to: STATE OF NEW HAMPSHIRE
	MAIL DOCUMENT PROCESSING DIVISION	Enclose, but do not staple or tape, your payment with this estimate. Do not file a \$0 estimate.
	TO: PO BOX 637 CONCORD NH 03302-0637	NH-104
		' Rev. 1
	(Cut along this line)	
FORM	NEW HAMPSHIRE DEPARTMENT OF REVEN	
NH-1041-ES	ESTIMATED FIDUCIARY BUSINES	SS TAX - 2001
722		
	2004	FOR DRA USE ONLY
For the CALEND	AR year $oldsymbol{2001}$ or other tax year beginning $oldsymbol{\{Mo}}$ Day Yea	and ending r
	☐ PLEASE PRINT OR TYPE	
FOR DRA USE ONLY	NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER
	NUMBER AND STREET ADDRESS	1/4 Business Enterprise Tax 1 \$
	ADDRESS (continued)	'
	CITY/TOWN, STATE & ZIP CODE	½ Business Profits Tax 2 \$
	55.M, 5.//12 W.Z.II 5552	
		Amount of This Payment 3 \$
	NH DEPT OF REVENUE ADMINISTRATION	Make checks payable to: STATE OF NEW HAMPSHIRE
	MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 637	Enclose, but do not staple or tape, your payment with this estimate. Do not file a \$0 estimate.
	TO: PO BOX 637 CONCORD NH 03302-0637	NH-104
		Rev. 1